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PTO/SB/01 (12-97)
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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing (surcharge (37 C.F.R. 1.16(e)) required)

Attorney Docket Number EX00-015

First Named Inventor Buchman et al.

COMPLETE IF KNOWN

Application Number /

Filing Date 13 March 2000

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that: My residence, post office address,

and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (it only one name is listed below) or an original, first and joint inventor (it plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insect p53 Tumor Suppressor Genes and Proteins

the specification of which (Title of the Invention)

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/184,373	23 February 2000	

[Page 1 of 2]

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DECLARATION Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
09/268,969	16 March 1999	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/01A attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business with the Patent and Trademark Office connected therewith:

☒ Customer Number

OR

☐ Registered practitioner(s) name/registration number listed below

Place Customer Number Label here
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Name	Registration Number	Name	PATENT TRADEMARK OFFICE Registration Number

☐ Additional registered practitioner(s) named on supplemental priority data sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number or Bar Code Label

23500

OR ☐ Correspondence address below

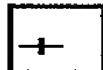
Name	PATENT TRADEMARK OFFICE				
Address					
Address					
City		State		ZIP	
Country		Telephone		Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])			Family Name or Surname				
Andrew Roy			Buchman				
Inventors Signature					Date		
Residence: City	Berkeley	State	CA	Country	US	Citizenship	US
Post Office Address	3119 Epton Avenue						
Post Office Address							
City	Berkeley	State	CA	ZIP	94705	Country	US

☒ Additional inventors are being named on the 3 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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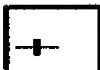
DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 3

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Darren Mark				Platt			
Inventor's Signature					Date		
Residence: City	San Francisco	State	CA	Country	US	Citizenship	US
Post Office Address		929 Pine Street, Apt. 201					
Post Office Address							
City	San Francisco	State	CA	ZIP	94108	Country	US
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
MichaelMartin				Ollman			
Inventor's Signature					Date		
Residence: City	Menlo Park	State	CA	Country	US	Citizenship	US
Post Office Address		1805 Atschul Avenue					
Post Office Address							
City	Menlo Park	State	CA	ZIP	94025	Country	US
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Lynn Marie				Young			
Inventor's Signature					Date		
Residence: City	San Mateo	State	CA	Country	US	Citizenship	US
Post Office Address		250 Baldwin Avenue, #4					
Post Office Address							
City	San Mateo	State	CA	ZIP	94401	Country	US

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>2</u> of <u>3</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Madelyn Robin				Demskey			
Inventor's Signature						Date	
Residence: City		San Francisco		State CA		Country US	
Post Office Address		250 Baldwin Avenue, #4					
Post Office Address							
City		San Mateo		State CA		ZIP 94401	
				Country US			
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Kevin Patrick				Keegan			
Inventor's Signature						Date	
Residence: City		San Lorenzo		State CA		Country US	
Post Office Address		17311 Via Estrella					
Post Office Address							
City		San Lorenzo		State CA		ZIP 94580	
				Country US			
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Lori				Friedman			
Inventor's Signature						Date	
Residence: City		San Francisco		State CA		Country US	
Post Office Address		One Bayside Village Place, Unit 212					
Post Office Address							
City		San Francisco		State CA		ZIP 94107	
				Country US			

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>3</u> of <u>3</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Casey				Kopczynski			
Inventor's Signature						Date	
Residence: City		Belmont		State CA		Country US	
Post Office Address		2769 St. James Road					
Post Office Address							
City		Belmont		State CA		ZIP 94002	
Country		US		Country		US	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Jeffrey S.				Larson			
Inventor's Signature						Date	
Residence: City		Burlingame		State CA		Country US	
Post Office Address		1220 El Camino Real #305					
Post Office Address							
City		Burlingame		State CA		ZIP 94010	
Country		US		Country		US	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Stephanie A.				Robertson			
Inventor's Signature						Date	
Residence: City		San Francisco		State CA		Country US	
Post Office Address		255 Fowler Avenue					
Post Office Address							
City		San Francisco		State CA		ZIP 94127	
Country		US		Country		US	

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